



COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled <u>SKIN ATTACHMENT MEMBER</u>, the specification of which:

[X] [] []	is attached hereto. was filed on _ as Application Serial No and was amended on was described and claimed in PCT International Application No and as amended under PCT Article 19 on	 filed on
	reby state that I have reviewed and understand the contents of the above-identified sp claims, as amended by any amendment referred to above.	ecification,
	knowledge the duty to disclose all information I know to be material to patentability in e of Federal Regulations, §1.56.	n accordance with

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

John N. Williams, Reg. No. 18,948 James W. Babineau, Reg. No. 42,276 Phyllis K. Kristal, Reg. No. 38,524 Celia H. Leber, Reg. No. 33,524 Timothy A. French, Reg. No. 30,175 John F. Hayden, Reg. No. 37,640

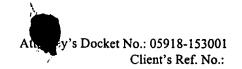
Address all telephone calls to PHYLLIS K. KRISTAL at telephone number 3409.

Address all correspondence to JOHN N. WILLIAMS at:

FISH & RICHARDSON P.C. 225 Franklin Street Boston, MA 02110-2804

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.





Date: 1//10/99

Combined Declaration and Power of Attorney

Page 2 of 2 Pages

Full Name of Inventor: HQWARD A. KINGSFORD

Inventor's Signature:
Residence Address:

Four Winterberry Drive

Amherst, New Hampshire 03031

United States of America

Citizenship:

Post Office Address: Four Winterberry Drive

Amherst, New Hampshire 03031

United States of America

20003225.doc